Effective October 1, 2004								09/84400						
CLAIMS AS FILED - PART I (Column:1) (Column:2)								SMALL ENTITY TYPE			OTHER THAN			
T	OTAL CLAIM	S						RATE	FEE		RATE	FEE		
F	OR·		NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC F	¥ 395.0	OF	BASIC FEE	790.00		
T	OTAL CHARG	EABLE CLAIMS	14 m	inus 20=	• (0,]	X\$ 25:		OF	.X50 l=.			
Ш	DEPENDENT	CLAIMS	3 ininus 3 =			Ø .		XW=	1	OR	- Van	 		
1.5	ULTIPLE DEF	NDENT CLAIM	•			1	+150=	1		<u> </u>	 			
* If the difference in column 1 is less than zero, enter *0" in column 2								TOTAL	╂┷	JOA	ــــــــــــــــــــــــــــــــــــــ			
CLAIMS AS AMENDED - PART II								·	<u> </u>	JOR	TOTAL OTHER	L		
	(Column 1) (Column 2) (Column 3)						ì.	SMALL	ENTITY	OR				
AMENOMENTA	11/23/04	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	EA USLY	PRESENT EXTRA		RATE	ADDI- TIONAI FEE		RATE	ADDI- TIONAL FEE		
	ીલ થ	. 12	Minus	- á	20	=		xฮ=		OR	X\$50=			
	Independent	. 3	Minus	•••	3	=]	XIO:	/	OR	X200=	1		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+150=	/	1	+300	/		
								TOTAL	<u> </u>	OR	TOTAL			
(Column 1) (Column 2) (Column 3)									ADDIT, FEE ADDIT, FEEL					
AMENDAIENT B		CLAMS REMAINING AFTER AMENDMENT		HIGHE NUME FREVIOR PAID F	:ST ER USLY	PRESENT BATRA		RATE,	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	12	Minus	20)	= Ø		×25 =		OR	XS(0=			
	Independent	<u>1.3</u>	Minus	<u>-3</u>		<u> = </u>		X 100=	,	OR	X200=			
	FIRST PRESE	ENTATION OF MIL	ILIPUE DEI	ENDENT (MIALE	11:	1	+150=		OR	+300=			
								TOTAL		-	TOTAL			
(Column 1) (Column 2) (Column 3)								DOTT, FEE I		2 /	voon. Feel	·		
AMENDMENT C		CLAIMS REMAINING AFTER · AMENOMENT		HIGHE NUMBE PREVIOL PAID FO	R JSLY	Preșent Extra		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL ,FEE		
	Total .	•	Minus ·	**		: =		X25!=		OR	X\$50 =	•		
	Independent	•	Minus	•••	·	#	-	×100 =		Ī	X200:	• •		
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR .				
* If the entry in column 1 is less than the entry in column 2, write "o" in column 3.														
***	i the "Highest Nu I the "Highest Nu	mber Previously Pai fiber Previously Pai	id For IN THIS Id For IN THI	S SPACE is t S SPACE is 1	ess than ess than	20, enter "20."	• • •	TOTAL OIT FEE	· -		DOIT, FEE			
1	The "Highest Num	ber Previously Paid	For (Total or	Independen	9 is the	highest ir end ei	reound	in the app	ropriate ba	in cptu	ma L. ·	•		

PATENT APPLICATION FEE DETERMINATION RECORD

FORM PTO-175 (Rev.-1004)

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